

Virginia HIV Community Planning Committee Meeting Summary

Members Present: Dan Alvarez, Nathaniel Amos, Odile Attiglah, Mark Baker, Bill Briggs, Heather Bronson, Tomas Cabrera, Rhonda Callaham, Denise Clayborn, Dr. Rosalyn Cousar, Vontrida Custis, Carrie Dolan, Gregory Fordham, Caroline Fuller, Richard Hall, Robert Hewitt, Martha Lees, Nicholas Mattsson, Girum Mekonnen, Dr. Joseph Riddick, Robert Rigby, Jr., Ruth Royster, Edward Strickler, Jr., Bruce Taylor, Silvia Villacampa

Members Absent: Hugo Delgado, Deirdre Johnson, Elaine Martin, Michael McIntyre, Paul Searcy, Leslie Stanley

Other Attendees: Ben Alonso, Caroline Campbell, Kathleen Carter, Ami Gandhi, Lindsey Matthews and Rachel Rees of the Virginia Department of Health; Debbie Camana of Virginia Commonwealth University HIV/AIDS Center

Total of 32 attendees.

Welcome and Introductions

Dr. Rosalyn Cousar called the meeting to order at 8:40 a.m. and introductions were made.

Old Business

- *AIDS Services and Education (ASE) Grant Awards* - On March 14, 2007, a Request for Proposals (RFP) was issued for the ASE grants program. A total of \$200,000 was available for this solicitation and targeted populations for this RFP were high risk individuals in rural areas, transgender persons, and incarcerated persons. A total of 13 proposals were received. The review panel met on May 16th and awarded the following agencies: Fan Free Clinic (Transgender), AIDS Services Group (Rural) and Council of Community Services (Incarcerated).

New Business

- *Program Announcement for CDC Expanded Testing Initiative* - Virginia is one of 26 jurisdictions eligible to compete for new funds from the CDC for HIV testing. CDC intends to make approximately 20 awards under a new grant program titled *Expanded and Integrated Human Immunodeficiency Virus (HIV) Testing for Populations Disproportionately Affected by HIV, Primarily African Americans*. If funded, VDH can expect to receive between \$550,000 and \$740,000 to support expanded and innovative HIV testing activities in clinical settings such as emergency departments, inpatient medical units, urgent care clinics, correctional health facilities, substance abuse treatment centers, etc. Up to 20 percent of the funds may be used for testing in community-based settings with positivity rates greater than two percent and/or be used to support a social marketing campaign to promote testing among African Americans. Although funding is currently available only for one year, CDC is attempting to secure

funds to support a three-year project period. The VDH Division of Disease Prevention is currently investigating partnerships with a variety of hospitals, community health centers and jails for this project. Activities are intended to support CDC's *Revised Recommendations for HIV Testing of Adults, Adolescents and Pregnant Women in Health Care Settings* that were issued in 2006. Applications are due to CDC by July 16th. The CPG voted to support the grant and Elaine Martin will draft a letter of support.

- *Minority AIDS Project Request for Proposals* – This RFP, totaling \$750,000, will be issued in late summer with the possibility of four annual renewals.

Membership

- Whitney Scott's membership was terminated due to excessive unexcused absences.
- Efforts are underway to find candidates from the transgender population.

Reports from the HIV Prevention Leadership Summit (HPLS)

Dr. Rosalyn Cousar reported that she noticed a trend in some states to merge prevention and treatment, which involves merging the CPG and Consortia. Kentucky already mandates this merge and others, such as Hawaii and Connecticut, are working towards it. She also attended a workshop that focused on the strengths of HIV+ persons to promote behavior changes rather than solely concentrating on client needs. Ami Gandhi also attended a roundtable discussion on different community planning models. Many states have merged care and prevention planning councils, while others are either moving towards it or contemplating a merge. Some states have strictly consumer-based community planning groups. She also discussed the roundtable discussion that she conducted along with Carrie Dolan on Virginia's process for prioritizing populations. The attendees showed a lot of interest in Virginia's process and some have contacted Ami to get more information. A CDC representative stated that people are referred to Virginia for best management practices, which says a lot about how well Virginia's CPG is regarded. Ed Strickler discussed the workshop he conducted, along with Ami Gandhi and Carrie Dolan, regarding Virginia's transgender health initiative and how to use data for HIV prevention planning. Attendees of the workshop were very receptive and amazed that this type of initiative could be done in Virginia. He also stated that there was a lot of interest about issues in rural communities. Carrie Dolan agreed with Ami and Ed that it was nice to hear positive feedback from other states about Virginia's initiatives. She also mentioned that she made connections with other epidemiologists for collaboration in finding ways to represent populations with little surveillance data in the *Epidemiological Profile*.

Selection of Interventions – Review and Approval of the Process

The committee broke into the same four groups as at the May meeting to complete the process of selecting interventions for the priority populations. The completed worksheets were given to Ami Gandhi to compile. At the September meeting, the group will discuss any interventions that were chosen differently by groups and a final list of interventions will be compiled for each priority population.

Lunch

Standards and Practices and Research Subcommittees met.
Ryan White and STD subcommittees met at 1:15.

Reports from the Subcommittees

Ryan White - Reported by Ben Alonso

- Ben Alonso announced he will be leaving his position at VDH on July 9th. He has been accepted to medical school in San Juan, Puerto Rico. His replacement at VDH will become the new co-chair, but Diana Jordan, Director of Health Care Services, will serve in that capacity at the next meeting in November.
- Mr. Alonso provided an update of changes that have been made to the AIDS Drug Assistance Program (ADAP). Several medications have been added to the formulary, including medications for diabetes, cholesterol, and neuropathy. Also, the exception criteria for three medications have changed. Updates to the ADAP formulary will now be sent electronically via e-mail and through the ADAP website at www.vdh.virginia.gov/epidemiology/DiseasePrevention/Programs/ADAP/index.htm. For any questions regarding the recent changes Faye Bates, ADAP Coordinator, should be contacted at 804-864-8019.
- A contract between VDH and Patient Services, Incorporated (PSI) has been finalized, and PSI will now manage the State Pharmaceutical Assistance Program (SPAP). All SPAP clients will continue to receive assistance with Medicare Part D premiums, and now some of those clients will be transitioned off ADAP to receive assistance with all aspects of medication cost-sharing under their Medicare Part D policies. There will be a wait list for medication cost-sharing assistance, and those clients on the wait list will continue to access medications through ADAP without interruption. ADAP programs will be notified as clients are provided the cost-sharing assistance so that these clients may be disenrolled from ADAP. ADAP clients can still be enrolled in the SPAP to begin receiving assistance with Medicare Part D premiums. Finally, current SPAP clients are required to sign and return a Release of Information form to transition their SPAP record to PSI to continue their SPAP enrollment.
- Due to the upcoming vacancy of Mr. Alonso's position at VDH, there will be a delay in the Statewide Coordinated Statement of Need (SCSN) process. It is expected that his replacement will direct the process, but if a replacement is not hired in time, VDH may contract with a consultant to lead the process. VDH expects to be fully compliant with Health Resources and Services Administration's (HRSA) guidelines in completing the process in time. However, unlike the previous SCSN process in 2004, it is unlikely that VDH will convene one large statewide conference with over a hundred participants, as the high cost involved reduces the amount of funding available for life saving medications and health care services. Instead, VDH is planning to gather information from a collection of available sources such as regional needs assessment process, public hearings, consumer committees, focus groups, and key informant interviews. Several members of the subcommittee expressed their opinion that many consumers are tired of surveys, and that VDH needs to ensure that client surveys are consistent and "client-friendly." Debbie Camana from the Pennsylvania/Mid-Atlantic AIDS Education and Training Center (PAMAAETC) pledged the assistance of her agency in the SCSN process if it is needed.

- Subcommittee members were reminded of their responsibilities and upcoming tasks as laid out in the Statewide Comprehensive Plan (SCP). As a follow-up to the primary care prevention messages survey that was completed last year, the subcommittee had agreed to help draft a set of primary prevention questions that providers can use as a tool for clients, as well as a list of responsibilities related to self care for clients. Subcommittee members Rick Hall and Rosalyn Cousar volunteered to ensure that this task is carried to its completion.

Standards & Practices - Reported by Ami Gandhi

- *Standards for HIV Prevention Interventions* – Ami Gandhi and Rachel Rees have begun revising the Taxonomy for HIV Prevention Interventions. They will first be reviewed by VDH staff and then sent out to the subcommittee for review. While doing this, it was discovered that there were no standards for community-level interventions. Ami and Rachel will develop standards with input from VDH staff and send them out to the subcommittee for their review and approval.
- *African American Call to Action* – Ami Gandhi began reviewing the two documents sent to the subcommittee to review – a CDC document and Florida’s campaign, “Silence is Death”. Members agreed that they want to create a document that is localized to the HIV/AIDS epidemic among Virginia’s black population. It was also agreed that the document should be limited to one to two pages so that it has more of an impact. It should also include up-to-date information, including data by geographic area and age breakdown, action steps and testing information. Ami mentioned a possible collaboration for this project with VDH’s Office of Minority Health. It was reiterated from the last meeting that distribution should include utilizing key leaders in the community in a personalized approach. Mark Baker presented a letter that he drafted along with Debbie Camana to include with the document. The group decided to tailor the letter to the organization/group it is being sent to. Individuals volunteered to gather information on various groups that will be sent to Ami.

STD - Programmatic Update by Caroline Campbell

- *Syphilis Campaign* - On May 10, the Division launched a social marketing campaign to raise awareness of syphilis and encourage testing. The campaign was developed through a contract with Virginia Broadcast Solutions and materials were tested with members of the key target audience comprised of the general population and Hispanics in northern Virginia. Campaign advertisements aired in Hampton Roads, northern Virginia and Richmond. The campaign’s key message was to get tested for syphilis and was executed through television and radio commercials aired on select stations in the Eastern, Northern and Central regions. Posters, coasters, bus ads (Northern only) and promotional materials were also developed. Using statistics provided by a Hotline Caller Report, Ms. Campbell showed that it was an effective campaign in that there was a significant increase of callers requesting information about syphilis (up from 6.9% in the same time period in 2006 to 37.9%) and STD testing (up from 14.7% to 53.6%).
- *Disclosure Assistance Services* – The pilot program started June 1st at the Arlington and Alexandria Health Departments and will run through August. Caroline distributed the posters that will be posted in clinical settings, along with postcards to be handed out in various venues, and will present the preliminary data at an upcoming meeting.

- *Performance Measures/Program Objectives* – CDC Performance Measures are national standards shared with all states; Division staff provide CDC with information regarding Virginia's performance progress through routine grant and annual narrative responses. Program objectives are specific standards by which Division and field disease intervention activities are measured, and may be modified as needed based on annual evaluation of progress towards the program's goals and objectives. Copies of both Performance Measures and program objectives were distributed for review.
- *State lab issues* – Discussion ensued regarding changes with the Division of Consolidated Laboratory Services (DCLS – the state lab) service delivery, including a recent decision to begin charging local jails for syphilis blood testing. HIV testing and electronic reporting of results were also discussed.
- *Upcoming PolyCom program* – An announcement was made regarding the June 28th PolyCom presentation, "Disclosure Issues for Perinatally Infected Youth". Subcommittee members expressed interest in seeing this topic presented in another forum, perhaps a statewide conference.

Research – Reported by Carrie Dolan

Carrie reported on the progress to date of the Epi Profile. She indicated that the report needs to be completed by the end of August so it can be approved in time for World AIDS Day on December 1st. Carrie will be e-mailing the integrated care and surveillance sections to members two weeks before the September 6th meeting and she requested that citations be returned to her in APA style.

Pennsylvania/Mid-Atlantic AIDS Education and Training Center (PAMAAETC)
--VCU HIV/AIDS Center – Central Virginia Local Performance Site – Debbie Camana, MSN, Site Director
--INOVA Juniper Program – Northern Virginia Performance Site – Dr. Rosalyn Cousar, Ph.D., Nurse Educator/Case Manager

The Pennsylvania Mid-Atlantic Education and Training Center provides education and training programs for health care professionals who work with clients at-risk, infected or affected by HIV. These training opportunities are made possible by a federal grant from the HIV/AIDS Bureau of the Health Resources and Services Administration (HRSA). The VCU HIV/AIDS Center, located in Richmond, is one of two Virginia local performance sites (LPS) of the PAMAAETC. The VCU LPS provides education and training programs for health care providers located in the eastern, central and southern regions of Virginia. The INOVA Juniper Program, located in northern Virginia, covers northern and northwest Virginia and parts of central Virginia. Both sites provide training programs for southwest Virginia. In addition to the funding provided by HRSA, both sites receive additional training dollars from VDH through the Virginia HIV/AIDS Resource and Consultation Center (VHARCC) to provide trainings for other allied health professionals such as social workers, substance abuse professionals and case managers. Health care professionals are given the opportunity to participate in clinical training programs and shadow health care clinicians and other professionals as they provide clinical care and/or prevention services to HIV-positive individuals and individuals at-risk for HIV. Other training and education opportunities include attending a variety of HIV programs such as lecture-based classes, interactive workshops, in-service training,

on-site clinical and telephone consultation, preceptorships and technical assistance to help organizations/agencies build administrative and clinical capacity. The training is free of charge. Education/training sessions will be scheduled throughout the Commonwealth during the upcoming fiscal year. For more information, contact Ms. Camana at (804) 828-2473 or dfcamana@vcu.edu or Ms. Cousar at (703) 321-2653 or Rosalyn.cousar@inova.org.

A Heightened National Response to the HIV/AIDS Crisis Among African Americans

Ami Gandhi discussed CDC's response to the HIV/AIDS crisis in the African American community. The document highlights the need to improve known, effective HIV-prevention interventions and implement new, culturally appropriate HIV/AIDS strategies for African Americans. The CDC plans to expand their partnerships with other federal agencies, state and local health departments, academic institutions, and community based organizations. Ami discussed CDC plans and action steps for this initiative. She also discussed the Standards and Practices Subcommittee's plan to create a Call to Action targeting the African American community.

Review of the May meeting summary

Motion was made and seconded to accept the minutes as written.

Planning for the September meeting

- 1) Update on DCLS procedural changes
- 2) Presentation on HIV vaccination program – Bill Briggs
- 3) Finalize interventions
- 4) Review grant application
- 5) Research and Standards & Practices Subcommittees will meet

The meeting was adjourned at 4:20 p.m.

Dr. Rosalyn Cousar, Community Co-Chair

Date

Kathleen Carter, Recording Secretary

Date